

Form F37 (Rule 10-10 (2))

This is the[1st/2nd/3rd/etc.]..... affidavit
of[name]..... in this case
and was made on[dd/mmm/yyyy].....

Court File No.:

Court Registry:

In the Supreme Court of British Columbia

Claimant:

Respondent:

CHILD SUPPORT AFFIDAVIT

[Rule 21-1 of the Supreme Court Family Rules applies to all forms.]

I,[name]....., of[address]..... SWEAR (OR AFFIRM) THAT:

- 1 I am the[claimant/respondent]..... .
- 2 The following is true to the best of my information and belief:

(a) Parties:

Claimant's name	Province of residence
Respondent's name	Province of residence

(b) Children:

Child's name	Birthdate [dd/mmm/yyyy]	Age	Child now living with	Relationship to claimant	Relationship to respondent
			<input type="checkbox"/> claimant <input type="checkbox"/> respondent	<input type="checkbox"/> natural child <input type="checkbox"/> step-child	<input type="checkbox"/> natural child <input type="checkbox"/> step-child
			<input type="checkbox"/> claimant <input type="checkbox"/> respondent	<input type="checkbox"/> natural child <input type="checkbox"/> step-child	<input type="checkbox"/> natural child <input type="checkbox"/> step-child
			<input type="checkbox"/> claimant <input type="checkbox"/> respondent	<input type="checkbox"/> natural child <input type="checkbox"/> step-child	<input type="checkbox"/> natural child <input type="checkbox"/> step-child
			<input type="checkbox"/> claimant <input type="checkbox"/> respondent	<input type="checkbox"/> natural child <input type="checkbox"/> step-child	<input type="checkbox"/> natural child <input type="checkbox"/> step-child

3 The[notice of family claim/counterclaim].....

- includes a claim for a child support order.
- included a claim for a child support order but that claim has been withdrawn.
- never included a claim for a child support order.

- 4 [Provide the following information if it is required under the child support guidelines (the Guidelines”).]
- (a) Claimant’s annual income as determined under sections 15 to 20 of the Guidelines: \$..... .
 - (b) Respondent’s annual income as determined under sections 15 to 20 of the Guidelines: \$..... .
 - (c) The claimant and the respondent have entered into an agreement as to income pursuant to section 15 (2) of the Guidelines, a copy of which agreement is attached. [Attach a copy of the agreement to this affidavit].

5 [Check box (a) or (b) and complete the required information.]

- (a) The monthly amount in Schedule 1 of the Guidelines is \$....., payable by the[claimant/respondent]..... .

[OR]

- (b) I have completed and attach to this affidavit the following: [Check the correct box(es) and attach the applicable Supplementary Child Support Fact Sheet(s).]

- Supplementary Child Support Fact Sheet B [if custody is shared, complete and attach Fact Sheet B]
- Supplementary Child Support Fact Sheet C [if custody is split, complete and attach Fact Sheet C]
- Supplementary Child Support Fact Sheet D [if one or more children is over the age of majority, complete and attach Fact Sheet D]
- Supplementary Child Support Fact Sheet E [if undue hardship is alleged, complete and attach Fact Sheet E]
- Supplementary Child Support Fact Sheet F [if at least one of the party’s incomes exceeds \$150,000, complete and attach Fact Sheet F]

6 [Check box (a), (b) or (c) and complete the required information.]

The proposed order

- (a) sets out that \$..... is the amount of child support payable by the[claimant/respondent]....., which amount accords with the child support guidelines.
- (b) by consent, pursuant to section 15.1 (7) of the *Divorce Act* (Canada) or section 93.1 (1) of the *Family Relations Act*, sets out that \$..... is the amount of child support payable by the[claimant/respondent]....., which amount is different than the amount required by the Guidelines.
- (c) sets out that \$..... is the amount of child support payable by the[claimant/respondent]....., which amount is different than the amount required by the Guidelines, but the following special provisions, within the meaning of section 15.1 (5) of the *Divorce Act*, have been made:
.....
.....
.....
- (d) sets out that \$..... is the amount of child support payable by the[claimant/respondent]....., in accordance with the agreement referred to in section 4 (c) of this affidavit.
- (e) does not include child support but the following arrangements have been made for the support of the child:

[If the expenses under section 7 of the Guidelines are included in the proposed order, check the following box and complete and attach Fact Sheet A.]

7 I have completed and attached to this affidavit Supplementary Child Support Fact Sheet A, and the amount set out in the proposed order for the expenses under section 7 of the Guidelines is \$..... .

8 [Check the correct box(es).]

- Medical coverage is available for the children under the claimant’s medical insurance plan.

Medical coverage is available for the children under the respondent's medical insurance plan.

Medical coverage is not available for the children under either of the party's medical insurance plans.

9 [Check box (a) or (b) and complete the required information.]

(a) There is no order of any court in force dealing with support of the children.

(b) Attached as Exhibit(s)A [B, C, D, as the case may be][is/are].... the order(s) in force that deal(s) with the support of the children.

10 [Check box (a) or (b) and complete the required information.]

(a) There is no agreement dealing with support of the children.

(b) Attached as Exhibit(s)A [B, C, D, as the case may be][is/are].... the written agreement(s) that deal(s) with the support of the children.

11 The amount of arrears of child support, as at[dd/mmm/yyyy]....., under any existing order or written agreement is:

nil, or

\$..... .

SWORN (OR AFFIRMED) BEFORE)

ME at, British Columbia)

on[dd/mmm/yyyy].....)

)

.....)

A commissioner for taking)

affidavits for British Columbia)

....[print name or affix stamp of commissioner]....

**SUPPLEMENTARY CHILD SUPPORT FACT SHEET A –
SPECIAL OR EXTRAORDINARY EXPENSES**

Section 7 expenses (net of tax credits and contributions from child(ren), etc.)

		Annual	Monthly
(a)	Child care expenses		
(b)	Portion of medical and dental premiums attributable to the child(ren)		
(c)	Health related expenses that exceed insurance reimbursement by at least \$100		
(d)	Extraordinary primary, secondary or other educational expenses		
(e)	Post-secondary school expenses		
(f)	Extraordinary extracurricular activities expenses		
(g)	Total Section 7 expenses		

Parties' respective proportionate shares of the total net monthly Section 7 expenses referred to at line (g) above:

	%	Amount
Claimant's proportionate share		
Respondent's proportionate share		

Total monthly child support payable by the[claimant/respondent]..... after taking into account the monthly Guidelines table amount under Schedule 1 of the Guidelines and the Section 7 expenses is \$.....

SUPPLEMENTARY CHILD SUPPORT FACT SHEET B – SHARED CUSTODY

	Claimant	Respondent
Number of children =		
Approximate percentage of time children spend with each parent	%	%
Annual Guidelines income [determine amount under sections 15 to 20 of the Guidelines]	\$	\$
Guidelines table amount [use applicable amount from Schedule 1 of the Guidelines]	\$	\$
Difference between the Guidelines table amount of the claimant and the Guidelines table amount of the respondent		\$.....
Section 7 expenses paid directly by each party	\$	\$

Any other relevant information regarding the conditions, means, needs and other circumstances of each spouse or of any child for whom support is sought:

It is proposed that child support in the amount of \$..... per month be paid by the[claimant/respondent].....

SUPPLEMENTARY CHILD SUPPORT FACT SHEET C – SPLIT CUSTODY

(a) Number of children principally resident with claimant for whom support is claimed	
(b) Respondent's annual Guidelines income [determine amount under sections 15 to 20 of the Guidelines]	\$
(c) Guidelines table amount payable by respondent for[insert number from paragraph (a)]..... children	\$
(d) Number of children principally resident with respondent for whom the claimant is obliged to pay support	

(e) Claimant's annual Guidelines income [<i>determine amount under sections 15 to 20 of the Guidelines</i>]	\$
(f) Guidelines table amount payable by claimant for[<i>insert number from paragraph (d)</i>]..... children	\$

Difference between Guidelines table amounts:[*difference between paragraphs (c) and (f)*].....

SUPPLEMENTARY CHILD SUPPORT FACT SHEET D – CHILD 19 YEARS OR OLDER

- (a) Number of child(ren) 19 years of age or older for whom support is claimed:
- (b) Child support is to be paid by the[*claimant/respondent*] (the “payor”)
- (c) Monthly Guidelines table amount of the payor under Schedule 1 of the Guidelines: \$.....

[*Check the following box and complete the following if you say that the amount of support should be different from the Guidelines table amount referred to in paragraph (c).*]

The person swearing this affidavit says that the Guidelines table amount is inappropriate and that the appropriate amount would be \$..... for the following reasons:[*Give reasons to justify the proposed amount, having regard to the condition, means, needs and other circumstances of the child and the financial ability of each parent and the child to contribute to the support of the child.*].....

SUPPLEMENTARY CHILD SUPPORT FACT SHEET E – UNDUE HARDSHIP

[Complete this form only if it applies to you under section 10 (3) and (4) of the Guidelines.]

1 Responsibility for unusually high debts reasonably incurred to support the family before separation or in order to earn a living		
Owed to	Terms of debt	Monthly Amount
• <i>[list]</i>	• <i>[provide details]</i>	\$..... \$.....
2 Unusually high expenses for exercising access to a child		
DETAILS OF EXPENSE		
• <i>[list]</i>		\$..... \$.....
3 Legal duty under a court order or separation agreement to support another person		
Name of person	Relationship	Nature of duty
4 Legal duty to support a child, other than a child for whom support is claimed, who is (a) under age 19, or (b) 19 or older but unable to support himself or herself because of illness, disability or other cause		
Name of person	Relationship	Nature of duty
5 Legal duty to support a person who is unable to support himself or herself because of illness or disability		
Name of person	Relationship	Nature of duty
6 Other undue hardship circumstances <i>[provide details]</i>		

INCOME OF OTHER PERSONS IN HOUSEHOLD

Name of person	Annual income
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Total	

SUPPLEMENTARY CHILD SUPPORT FACT SHEET F – INCOME OVER \$150,000

1	Total number of children for whom support is claimed =	
2	Guidelines table amount for \$150,000 =	\$.....
3	Plus% of income over \$150,000 [determine applicable percentage from the Guidelines table] =	\$.....
4	Guidelines table amount [Total amount of lines 2 and 3]	\$.....

[If, under section 4 (b) of the Guidelines, an amount is agreed on that is different than the Guidelines table amount set out in line 4 above, check the following box and set out the amount agreed on and the reasons for agreeing on that different amount, having regard to the condition, means, needs and other circumstances of the child and the financial ability of each parent and the child to contribute to the support of the child.]

We have agreed on an amount of child support that differs from the Guidelines table amount.

Amount of child support agreed on: \$.....

Reasons why the amount agreed on differs from the Guidelines table amount: